PTO/SB/22 (03-09)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) N9810.0031/P031				
pplication Number 10/671,717-Conf. #2024		Filed September 29, 2003), 2003		
For BUCCAL, POLAR AND NON-POLAR SPRAY CONTAINING ONDANSETRON						
Art Unit 1616		Examiner	M. Haghig	hatian		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.						
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):						
	<u>Fee</u>	Small Entity Fee	2			
One month (37 CFR 1.17(a)(1))	\$130	\$65	\$			
Two months (37 CFR 1.17(a)(2))	\$490	\$245	\$			
X Three months (37 CFR 1.17(a)(3))	\$1110	\$555	\$	555.00		
Four months (37 CFR 1.17(a)(4))	\$1730	\$865	\$			
Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	\$			
Applicant claims small entity status. See 37 CFR 1.27. A check in the amount of the fee is enclosed. X Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. X The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number						
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).						
attorney or agent of record. Registration number if acting und	.34.	32,115				
		May 6, 2009				
Signature		Date				
James W. Brady, Jr.		(202) 420-4786				
Typed or printed name Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.						
Total of forms are submit	ted.					

I hereby certify that this paper (along with any paper ref	erred to as beir	ng attached or enclosed	i) is being transmitted via the Office electronic filing
system in accordance with § 1.6(a)(4).			
Dated: 5/4/09		\times /	